

# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Attorney Docket Number 0-0424

First Named Inventor Devinne H. Brown

**COMPLETE IF KNOWN**

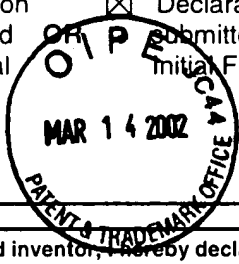
Application Number 10/029343

Filing Date 12/28/2001

Group Art Unit 2642

Examiner Name

- ☐ Declaration Submitted with Initial Filing
- ☒ Declaration Submitted after Initial Filing



As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method And System For Providing Billing Capability For A Service Node In An Advanced  
Intelligent Network Environment

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on 12/28/2001 as United States Application Number or PCT International  
Application Number 10/029343 and was amended on (if applicable).

**COPY OF PAPERS  
ORIGINALLY FILED**

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date( MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

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# DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar  
Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CANAVAN, Robert T.	37592	CONOVER, Michele L.	34962
DELACRUZ, Cedric G.	36498	DWORETSKY, Samuel H.	27873
ISAACSON, Thomas M.	44166	LEE, Benjamin S.	42787
LEVY, Robert B.	28234	MCGAHAN, Susan E.	35948
MONKA, Gary H.	35290	RESTAINO, Thomas A.	33444

☒ I also appoint the following additional registered practitioner(s) named on the Registered Practitioner Information (Supplemental Sheet) (PTO/SB/02C modified by AT&T Corp.) attached hereto with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all phone inquiries to: Levy, Robert B. 908-221-5714

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**

Page of

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

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**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet****Page of****Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Hwey Chang**Signature****Date****Citizenship** United States**Address (line 1)** 13 Opatut Court**Address (line 2)** Morganville**Address (line 3)** Monmouth County**Address (line 4)** New Jersey**Address (line 5)** USA**Zip Code** 07751**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Romel R. Khan**Signature** *Romel R Khan***Date**

3/1/2002

**Citizenship** Bangladesh**Address (line 1)** 19A Lakeview Terrace**Address (line 2)** Eatontown**Address (line 3)** Monmouth County**Address (line 4)** New Jersey**Address (line 5)** USA**Zip Code** 07724**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Michael Koptiw**Signature****Date****Citizenship** United States**Address (line 1)** 12 Foster St.**Address (line 2)** Red Bank**Address (line 3)** Monmouth County**Address (line 4)** New Jersey**Address (line 5)** USA**Zip Code** 07701**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Antoinette Rule**Signature****Date****Citizenship** United States**Address (line 1)** 5 Windfall Lane**Address (line 2)** Trenton**Address (line 3)** Mercer County**Address (line 4)** New Jersey**Address (line 5)** USA**Zip Code** 08690

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**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet****Page of****Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name** Tejanand Sarju**Signature****Date**

3/1/02

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**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name****Signature****Date****Citizenship****Address (line 1)****Address (line 2)****Address (line 3)****Address (line 4)****Address (line 5)****Zip Code****Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name****Signature****Date****Citizenship****Address (line 1)****Address (line 2)****Address (line 3)****Address (line 4)****Address (line 5)****Zip Code****Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor**Name****Signature****Date****Citizenship****Address (line 1)****Address (line 2)****Address (line 3)****Address (line 4)****Address (line 5)****Zip Code**

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**Additional Foreign Applications:**

**Additional Provisional applications:**

**Additional U.S. applications:**

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**DECLARATION****Registered Practitioner  
Information  
(Supplemental Sheet)**

Name	Registration Number	Name	Registration Number
STEINMETZ, Alfred G.	22971	SZWERC, Christine M.	43177

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